

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 4  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CLIMATE HAWKS VOTE POLITICAL ACTION</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00548461       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;"><input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on</span> <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <b>Becker Digital Strategies</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1400 East West Highway #502			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1250.00</div>	
City Silver Spring	State MD	Zip Code 20910	<b>Transaction ID : SE.11479</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/ Type	<div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate O'ROURKE, ROBERT (BETO), , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Becker Digital Strategies</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1400 East West Highway #502			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1250.00</div>	
City Silver Spring	State MD	Zip Code 20910	<b>Transaction ID : SE.11480</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising		Category/ Type	<div style="display: flex; justify-content: flex-end; gap: 10px;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> /          <div style="border: 1px solid black; padding: 2px;">D D D</div> /          <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate SANCHEZ, JANA LYNNE MS, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2500.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MATHEWS, RICHARD M., , ,

[Electronically Filed]

Date

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CLIMATE HAWKS VOTE POLITICAL ACTION</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00548461
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Middleseat Consulting</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 01 / 2018</b>	
Mailing Address <b>1329 C Street NE</b>		Amount <b>3000.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>	Transaction ID : <b>SE.11474</b>
Purpose of Expenditure <b>Digital Advertising</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2018</b>	
Name of Federal Candidate <b>CASTEN, SEAN, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>IL</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Middleseat Consulting</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 01 / 2018</b>	
Mailing Address <b>1329 C Street NE</b>		Amount <b>3500.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>	Transaction ID : <b>SE.11475</b>
Purpose of Expenditure <b>Digital Advertising</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2018</b>	
Name of Federal Candidate <b>HORSFORD, STEVEN ALEXZANDER, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NV</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>6500.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MATHEWS, RICHARD M., ,

[Electronically Filed]

Date

 MM / DD / YYYY  
**11 / 02 / 2018**

Signature

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NAME OF COMMITTEE (In Full) <b>CLIMATE HAWKS VOTE POLITICAL ACTION</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00548461
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Middleseat Consulting</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 01 / 2018</b>	
Mailing Address <b>1329 C Street NE</b>		Amount <b>3500.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>	Transaction ID : <b>SE.11476</b>
Purpose of Expenditure <b>Digital Advertising</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2018</b>	
Name of Federal Candidate <b>LURIA, ELAINE, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>02</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>VA</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Middleseat Consulting</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 01 / 2018</b>	
Mailing Address <b>1329 C Street NE</b>		Amount <b>4500.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>	Transaction ID : <b>SE.11477</b>
Purpose of Expenditure <b>Digital Advertising</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2018</b>	
Name of Federal Candidate <b>MCCREADY, DANIEL, ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>09</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>8000.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MATHEWS, RICHARD M., ,

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FOR SE OF FORM 24/48			

NAME OF COMMITTEE (In Full) <b>CLIMATE HAWKS VOTE POLITICAL ACTION</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00548461	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Middleseat Consulting</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 01 / 2018</b>	
Mailing Address <b>1329 C Street NE</b>		Amount <b>4500.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>	Transaction ID : <b>SE.11482</b>
Purpose of Expenditure <b>Digital Advertising</b>	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>11 / 02 / 2018</b>	
Name of Federal Candidate <b>MUCARSEL-POWELL, DEBBIE, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>26</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>
Calendar Year-To-Date Per Election for Office Sought <b>4500.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure	Category/Type		
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>4500.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>21500.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MATHEWS, RICHARD M., , ,

[Electronically Filed]

Date

MM	DD	YYYY
11	02	2018

Signature